



OFFICE OF THE
BOARD OF APPEALS
TOWN OF DUNSTABLE
TOWN HALL
511 MAIN STREET
DUNSTABLE, MA 01827-1313

Application for:

Administrative Appeal: _____ Variance: _____ Special Permit: _____ Finding: _____
(Sect. 4 DZBL)

This application must be completed, signed, and submitted with the filing fee by the applicant, or representative of the applicant, in accordance with the Zoning Board of Appeals' Rules and Regulations as adopted under its jurisdiction as a Variance and Special Permit granting authority and the procedures as set forth in said Rules and Regulations.

Location of Property _____

Name of Applicant _____

Address _____

Telephone _____ Applicant is: Owner _____ Tenant _____
Agent/Attorney _____ Purchaser _____

Property Owner's Name _____ Address _____

Property Characteristics: Lot Area _____ Present Use _____

Assessor's Map _____ Lot _____ Present Zoning _____

Registry of Deeds Book No. _____ Page No. _____

****A COPY OF A CERTIFIED SITE PLAN MUST ACCOMPANY THIS APPLICATION***
Nature and justification of request for a variance or a special permit: _____

Applicable By-law section(s): _____

I hereby request a hearing before the Dunstable Zoning Board of Appeals with reference to the above application.

Signature of Applicant (or representative) _____

Address (if not applicant) _____

Telephone _____ Owner's permission if other than applicant _____

Application reviewed and Account Deposits received in the amount of :

Fee: \$ _____ Date: _____

Received by: _____ Site Plan received: _____

revised 9/6/03